Docket No.: 907A.0145.U1(US)

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter, which is claimed and for which a patent is sought on the invention entitled:

## PHASE ERROR DETECTOR USING I/Q INTERFERENCE CANCELLATION

the specificati	ion of which:		
(check one)	is attached hereto.		
	was filed on, and was amended o	as U.S. Applic n (if applicable).	cation Serial No.
	filed on	claimed in PCT International App and	
	and/or ☐ as amended ι	under PCT Article 19 on under PCT Article 34 as published in	the Annex(es) to
	the Internation	onal Preliminary Examination Report	(if any).
I hereby sta	te that I have reviewed, including the claims, as a	and understand the contents of the mended by any amendment referred t	above-identified o above.
known to me	ge the duty to disclose to to be material to the pater egulations, §1.56	the U.S. Patent and Trademark Officentability of this application as defined	e all information in Title 37, Code
foreign applied identified be	lication(s) for patent or clow any foreign applicat	its under Title 35, United States Co inventor's certificate(s) listed below ion(s) for patent or inventor's certif n on which priority is claimed:	v and have also
Prior Foreign Application(s)		Priority (	Claimed
		Yes	☐ No
(Number)	(Country)	(Day/Mon/Year Filed)	

I hereby claim the benefit under Title 35, United States Code, §119(e) of the United States provisional patent application(s) listed below:

(Application Serial No.)

(Filing Date)

I hereby claim benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)

(Filing Date)

(Status)

POWER OF ATTORNEY: As a named inventor I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith:

All attorneys associated with Customer No.: 29,683

## **SEND CORRESPONDENCE TO:**

## Customer No. 29,683

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

MIDDLE INITIAL **FIRST NAME** LAST NAME **FULL NAME** Richard OF INVENTOR Ertel **CITIZENSHIP** STATE OR COUNTRY CITY RESIDENCE & **USA** Midvale Utah CITIZENSHIP ZIP CODE **CITY & STATE** P.O. ADDRESS **POST OFFICE** 84047 Midvale, Utah **ADDRESS** 6961 Wellwood Road Signature Ruly B & Date  $\frac{2/3/2004}{}$ 

IDDLE INITIAL FIRST NAME LAST NAME **FULL NAME** M. Griffin Dan OF INVENTOR **CITIZENSHIP** CITY STATE OR COUNTRY **RESIDENCE &** USA Bountiful Utah CITIZENSHIP ZIP CODE **CITY & STATE POST OFFICE** P.O. ADDRES\$ Bountiful, Utah 84010 1086 Qakridge Lane **ADDRESS** Signature\_\_ MIDDLE INITIAL LAST NAME FIRST NAME **FULL NAME** Johnny M. Harris OF INVENTOR **CITIZENSHIP** STATE OR COUNTRY **RESIDENCE &** CITY Centerville USA Utah CITIZENSHIP ZIP CODE **CITY & STATE** P.O. ADDRESS **POST OFFICE** Centerville, Utah 84014 80 West 700 South **ADDRESS** Signature g LAST NAME FIRST NAMEMIDDLE INITIAL **FULL NAME** Hall Eric OF INVENTOR **CITIZENSHIP** STATE OR COUNTRY **RESIDENCE &** CITY USA Utah Holliday **CITIZENSHIP** CITY & STATE ZIP CODE P.O. ADDRESS **POST OFFICE** Holliday, Utah 84124 4108 South 900 East **ADDRESS** Date 2-4-64 Signature FIRST NAMEMIDDLE INITIAL LAST NAME **FULL NAME Thomas** R. Giallorenzi OF INVENTOR **CITIZENSHIP** STATE OR COUNTRY **CITY RESIDENCE &** USA Utah **CITIZENSHIP** Riverton **CITY & STATE** ZIP CODE P.O. ADDRESS POST OFFICE 84065 Riverton, Utah 7794 West Mountain Top Road **ADDRESS** Date 2/2/04 Signature /